

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | JML | | 8/30/00 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | ALL | 854 | 10-12-00 |
| RESPONSE FORMALITY REVIEW | MB | 863 | 12-13-00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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Best Available Copy